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| 1. CORRESPONDENCE ADDRESS | 2. INVENTOR(S) ADDRESS CHANGE (Complete only if there is a change) |
| <p>3-9-93</p> <p>NILSSON & GREEN</p> <p>707 WILSHIRE BOULEVARD 32ND FLOOR</p> <p>LOS ANGELES, CA 90017</p> | INVENTOR'S NAME |
| | Street Address |
| | City, State and ZIP Code |
| | CO-INVENTOR'S NAME |
| | Street Address |
| | City, State and ZIP Code |
| | <input type="checkbox"/> Check if additional changes are on reverse side |

| | | | | |
|------------------------|-------------|--------------|----------------------------|-------------|
| SERIES CODE/SERIAL NO. | FILING DATE | TOTAL CLAIMS | EXAMINER AND GROUP/PT UNIT | DATE MAILED |
| 07/803,269 | 12/03/91 | 058 | BROWN | 11/17/92 |
| First Named Applicant | RONALD A. | | | |

TITLE OF INVENTION TELEPHONIC-INTERFACE STATISTICAL ANALYSIS SYSTEM

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|-------------------|----------------|-----------|-------------|--------------|---------|----------|
| ATTY'S DOCKET NO. | CLASS-SUBCLASS | BATCH NO. | APPLN. TYPE | SMALL ENTITY | FEE DUE | DATE DUE |
| 10186 | 77 024,000 | 105 | UTILITY | NO | 1170.00 | 11/17/92 |

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| 3. Further correspondence to be mailed to the following: | 4. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agents OR alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed. |
| <p>Nilsson, Wurst & Green</p> <p>707 Wilshire Boulevard</p> <p>Suite 3200</p> <p>Los Angeles, CA 90017</p> | <p>Nilsson, Wurst & Green</p> <p>707 Wilshire Blvd.</p> <p>32nd Floor</p> <p>Los Angeles, CA 90017</p> |

050 107803269 0020 930301 930309 142 1170.00

0020 1141105 20031 930309 930309 561 30.00

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| 5. ASSIGNMENT DATA TO BE PRINTED ON THE PATENT (print or type) | | 6a. The following fees are enclosed: | |
| (1) NAME OF ASSIGNEE: | 02 | <input checked="" type="checkbox"/> Issue Fee | <input checked="" type="checkbox"/> Advanced Order - # of Copies 10 |
| FIRST DATA RESOURCES INC. | | (Minimum of 10) | |
| (2) ADDRESS: (City & State or Country) | | 6b. The following fees should be charged to: | |
| 10825 Farnum Drive | | DEPOSIT ACCOUNT NUMBER 14-1105 | |
| (3) STATE OF INCORPORATION, IF ASSIGNEE IS A CORPORATION | | (Enclose Part C) | |
| Omaha, Nebraska 68154 | | <input type="checkbox"/> Issue Fee | <input type="checkbox"/> Advanced Order - # of Copies |
| | | <input checked="" type="checkbox"/> Any Deficiencies in Enclosed Fees (Minimum of 10) | |
| <input type="checkbox"/> This application is NOT assigned. <input type="checkbox"/> Assignment previously submitted to the Patent and Trademark Office. <input type="checkbox"/> Assignment is being submitted under separate cover. Assignments should be directed to Box ASSIGNMENTS. | | The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee to the application identified above. | |
| PLEASE NOTE: Unless an assignee is identified in Block 5, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment. | | (Signature of party in interest of record) <u>Rena Kuyper</u> (Date) <u>2/12/93</u> | |
| NOTE: The Issue Fee will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the Patent and Trademark Office. | | | |

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